

## David Mead

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**From:** Wendy Sheine <wssheine@gmail.com>  
**Sent:** Monday, October 14, 2013 9:59 PM  
**To:** David Mead  
**Subject:** HB 4865

October 14, 2013

David Mead, Clerk of the House Health Policy Committee

State Representative

State Capitol

P.O. Box 30014

Lansing, MI 48909-7514

Re: House Policy Committee Testimony October 15, 2013

Dear Mr. Mead:

I am writing today to express my opposition to HB 4865, which has been proposed to the House Health Policy Committee this year. I am a general dentist who has spent my entire career (nearly 30 years) treating disabled, frail elderly and dementia patients in nursing home, homebound, hospital, adult day care and clinic settings. I also lecture on geriatric dentistry and dentistry and dementia to a wide variety of health professionals as well as the lay public. The Michigan Dental Association has represented HB 4865 as necessary to protect the safety of Michigan children from dentists using mobile dental equipment in alternate settings such as schools to perform screenings, x-rays and cleanings but who do not refer patients for comprehensive care. However, this bill will have dire unintended consequences for frail elderly, disabled and dementia patients residing in nursing homes and other care facilities, who cannot be treated in a traditional dental office, because the vast majority of these offices are not equipped with Hoyer lifts, space and personnel for patient transfers, restrooms that can accommodate Gerichairs, etc. Some patients, including those on ventilators and moderate and advanced dementia patients, cannot be treated successfully in traditional offices at all. As well, since reimbursement for dental care for this population remains extremely low (unlike the newly increased pediatric reimbursement rates, which have benefitted from MICHild and provisions of the Affordable Care Act), very few dentists are willing to accept these patients into their practices for financial reasons. For this diverse and rapidly growing part of Michigan's population, dentists using portable dental equipment in the settings in which patients reside

can provide the most effective and compassionate care with the lowest cost and disruption. The proposed legislation places extremely high regulatory and compliance burdens on dentists practicing in alternative settings. None of these requirements apply to the dentist if they are treating the same patient in a fixed office. Under this legislation, dentists using portable equipment are responsible for arranging referrals to specialists for nursing home patients, in direct contradiction to federal law (OBRA, 1987). It makes us responsible for providing fire detectors, acceptable construction and other nursing home building issues over which we have no control. It mandates that we report to the state every procedure and fee for every patient, and requires that our consent form specify that the patient has the choice to go to a traditional dentist instead of using a mobile dentist as their dental home. Also, every dentist treating nursing home patients is required to have a written agreement with a local traditional dental office which must agree to see all the patients in a nursing home or facility at any time. There is also a stipulation for an unspecified registration fee. These are only a few of the restrictions specified.

The MDA insists that this regulation is required because the current Dental Practice Act does not have any jurisdiction over dentistry practiced anywhere except a traditional office. In fact, the Dental Practice Act regulates dentists, not the setting in which the dentist practices. If some minor changes need to be made to the Dental Practice Act to sufficiently protect Michigan residents, then this can certainly be quickly accomplished in a way that will not have the effect of severely restricting dentists from being able to practice in nursing homes, assisted living residences, group homes and adult day care programs. This would be far preferable to HB 4865, which would prevent special-needs and frail elderly patients from receiving the most humane, cost-effective and comprehensive dental care that Michigan dentists can provide.

I would be happy to discuss these issues with you at your convenience. I can also put you in contact with several nursing home administrators and social workers who have offered to host you at their facilities to demonstrate the value of mobile dentistry to their patients. I urge you to obtain more information on this issue before reporting out a bill which will effectively eliminate this patient care model in Michigan. Thank you for your consideration.

Sincerely,

Wendy S. Sheine, D.D.S., Ph.D.